

ISSUE SLIP STAPLE AREA. (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | 127 | | 04-12-01 |
| O.I.P.E. CLASSIFIER | | 48 | 5/8/01 |
| FORMALITY REVIEW | H.S | 866 | 06-04-01 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted
 N No
 I Interference
 A Appeal
 O Objected

BEST AVAILABLE COPY

| Claim | Date |
|----------------|------|
| Final Original | |
| 1 | ✓ |
| 2 | ✓ |
| 3 | ✓ |
| 4 | ✓ |
| 5 | ✓ |
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| 16 | ✓ |
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| 18 | N |
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| 50 | N |

| Claim | Date |
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| Final Original | |
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| Claim | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

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